



Public Forum PowerPoint Presentation

May 25, 2011

May 31, 2011

June 2, 2011

June 6, 2011



Courtney Burke
Commissioner



Andrew M. Cuomo
Governor



Nirav R. Shah, M.D.
Commissioner



This presentation was given before public audiences on May 25, May 31, June 2 and June 6, 2011. It was narrated by OPWDD Commissioner Courtney Burke, Deputy Commissioner Jim Moran and OPWDD 1115 Waiver Unit Director Kate Marlay. The presentation describes the goals and process of New York State's People First Waiver initiative.

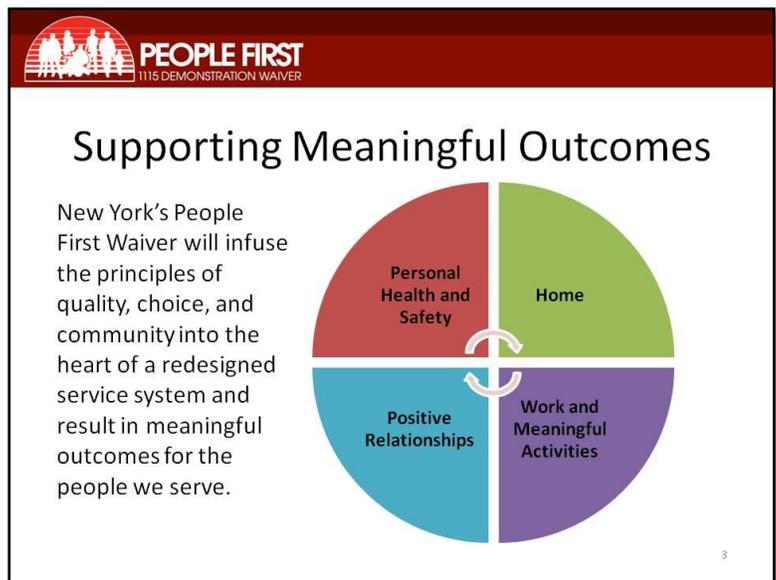


Commissioner Burke recently ended a statewide listening tour in which she met with individuals with developmental disabilities and family members and listened as they told her what changes they would like to see in the service system.

Today's public forum is an opportunity for OPWDD to review the goals of the People First Waiver and receive your input on these objectives.

The People First Waiver will continue to build on OPWDD’s current vision for all people with developmental disabilities to enjoy meaningful relationships with friends, family and others in their lives, experience personal health and growth, live in a home of their choice, and fully participate in their communities.

The People First Waiver must continue to support and build upon these core values and outcomes for people with developmental disabilities.



Supporting Meaningful Outcomes

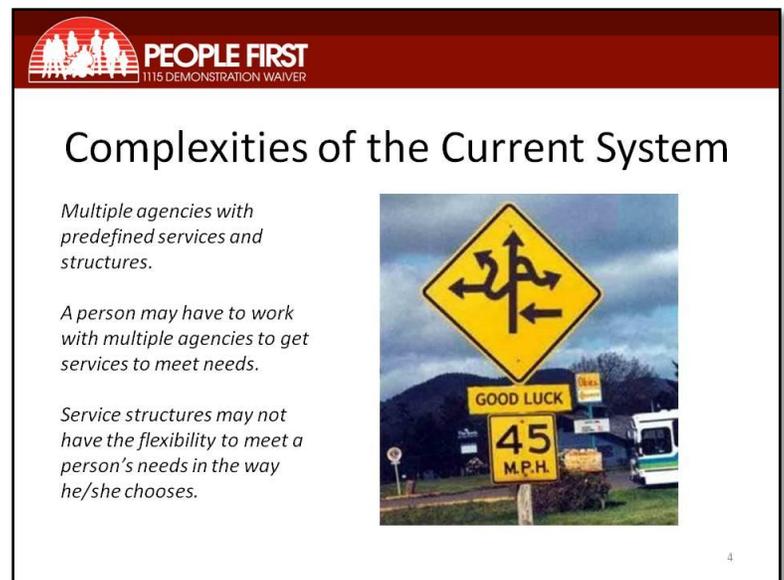
New York’s People First Waiver will infuse the principles of quality, choice, and community into the heart of a redesigned service system and result in meaningful outcomes for the people we serve.

The diagram consists of a circle divided into four quadrants: Personal Health and Safety (top-left, red), Home (top-right, green), Positive Relationships (bottom-left, blue), and Work and Meaningful Activities (bottom-right, purple). A central white circle with a circular arrow indicates a continuous cycle between these areas.

Why do we need change?

New York State’s system of community-based supports and services for people with developmental disabilities has been incredibly successful at helping people live richer lives in their communities, but has grown increasingly complex over the last 30+ years. Our fiscal and administrative infrastructure is still tied to the institutional past.

The image of this road map with arrows in all directions displays how people often feel as they navigate our system.



Complexities of the Current System

Multiple agencies with predefined services and structures.

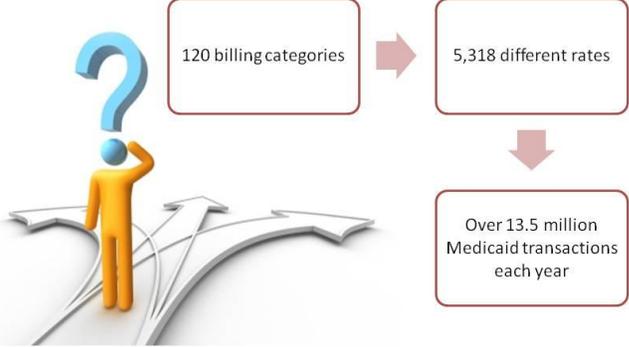
A person may have to work with multiple agencies to get services to meet needs.

Service structures may not have the flexibility to meet a person’s needs in the way he/she chooses.

The photograph shows a yellow diamond-shaped sign with four arrows pointing in different directions (up, down, left, right). Below it are rectangular signs for 'GOOD LUCK' and '45 M.P.H.'. In the background, there are other signs and a building.



Over 600 Not-for-Profit Provider Agencies



120 billing categories → 5,318 different rates

↓

Over 13.5 million Medicaid transactions each year

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With a system that includes over 600 not-for-profit agencies, 120 billing categories, 5,318 different rates and over 13.5 million Medicaid transactions each year – our system is also currently very complex and inefficient to administer.

Surely there must be a better way.



Vision for the Future System



Care coordination connects individuals with the agencies, services, and funding to meet needs.

Person-centered planning increases satisfaction and allows individuals to choose how to achieve meaningful outcomes.

Streamlined coordination improves access, choice, and flexibility while lowering Medicaid costs.

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Through the People First Waiver, we envision a system of supports and services characterized by improved:

- coordination of comprehensive care for individuals who require services from more than one system,
- person-centered planning and personal outcomes, and
- greater access, choice and flexibility in service delivery that allows services to respond to individuals' needs with appropriate, individualized levels of care.

The waiver will allow New York State to demonstrate that these system improvements will result in more efficient use of Medicaid funds.

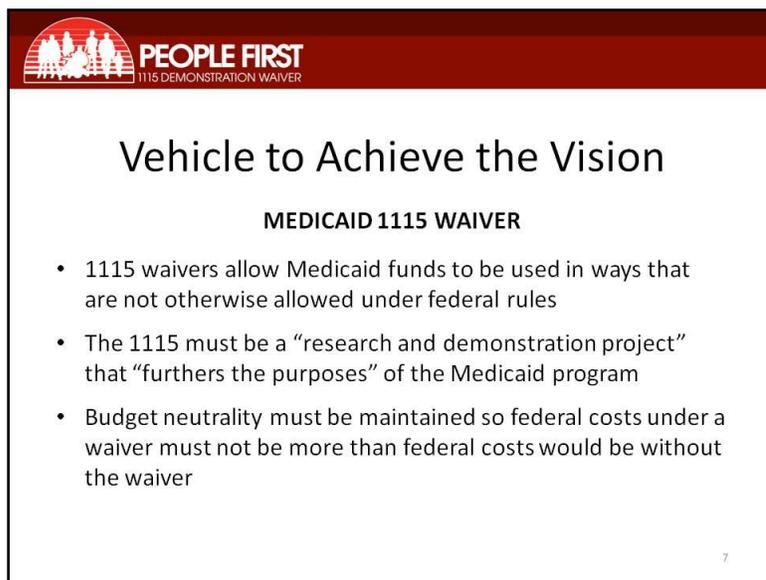
A waiver, as the term suggests, is authority to waive certain Medicaid rules or requirements and still receive Medicaid funding for services. To receive this authority, a state must submit a detailed application to CMS describing how the system will meet federal Medicaid objectives and maintain budget neutrality. Budget neutrality means that the 1115 waiver cannot increase cost to the federal government.

An 1115 Research & Demonstration

Waiver is a waiver that allows the state to continue receiving federal Medicaid funds for services while it designs and implements system improvements. This kind of waiver provides flexibility to states to develop innovative service systems that otherwise would not be possible under standard Medicaid rules.

An 1115 waiver requires the state to demonstrate the benefits of the designed improvements through a carefully constructed evaluation. CMS must approve the final application and an implementation plan before a state may proceed to implement the plans described in its application.

The waiver is a tremendous opportunity to redesign the system, and it is important to clarify what the People First Waiver is and is not.



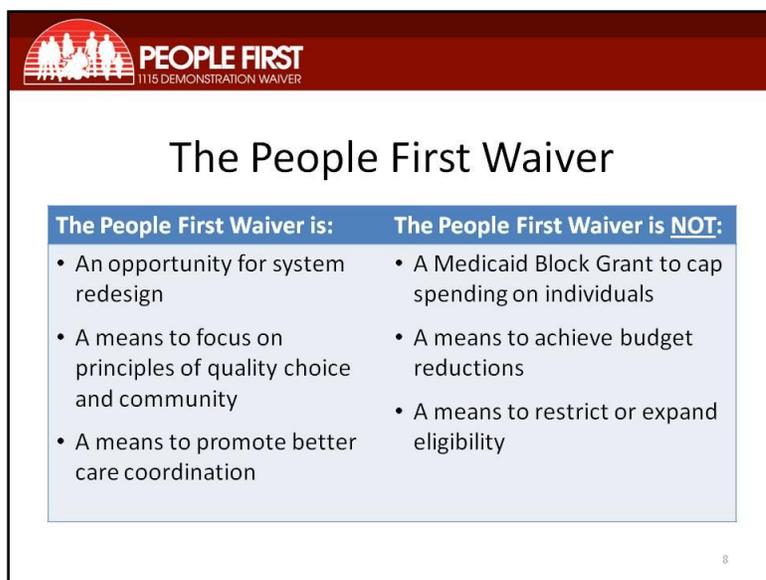
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Vehicle to Achieve the Vision

MEDICAID 1115 WAIVER

- 1115 waivers allow Medicaid funds to be used in ways that are not otherwise allowed under federal rules
- The 1115 must be a “research and demonstration project” that “furthers the purposes” of the Medicaid program
- Budget neutrality must be maintained so federal costs under a waiver must not be more than federal costs would be without the waiver

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The People First Waiver

| The People First Waiver is: | The People First Waiver is <u>NOT</u> : |
|---|--|
| <ul style="list-style-type: none"> • An opportunity for system redesign • A means to focus on principles of quality choice and community • A means to promote better care coordination | <ul style="list-style-type: none"> • A Medicaid Block Grant to cap spending on individuals • A means to achieve budget reductions • A means to restrict or expand eligibility |

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Guiding Principles

| Respect for Individuals and Families | Care Coordination | Realigned Incentives |
|---|---|---|
| <ul style="list-style-type: none"> • The needs of families will be respected and supported. • Cultural diversity will be respected and supported. • Individuals' rights—including the right to live in the least restrictive environment—and opportunities for choice will be safeguarded. • Fair opportunities for dispute resolution will be available to all individuals, families, and providers. | <ul style="list-style-type: none"> • All services provided to individuals, including those funded outside the waiver, will be coordinated. • Services will be provided pursuant to a comprehensive plan intended to assure the individual's well-being and achieve specific goals. • Individuals and families will be afforded easy access to needed services. | <ul style="list-style-type: none"> • Financial support will be directed to individuals, not to programs or institutions. • Predictable funding levels. • Operational transparency and full disclosure. • Funding will support program flexibility to reflect individuals' changing service needs. |

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New York State outlined its vision for the People First Waiver in a concept paper that was submitted to the federal Centers for Medicare & Medicaid Services (CMS) in April 2011. The concept paper (which is available on the People First Waiver Web page at http://www.opwdd.ny.gov/2011_waiver/index.jsp) outlined several principles that will guide the development of the waiver.

These principles define how the waiver will fulfill New York State's commitment to supporting individuals with developmental disabilities and their families, and include:

- Respect for individuals and families;
- Care coordination that helps an individual to receive all the supports they need to live as independently as possible; and
- Realigned incentives that will ensure that funds are more clearly tied to services to individuals' needs and the positive outcomes they desire.



Scope of the People First Waiver

Comprehensive services for Medicaid-enrolled individuals with developmental disabilities:

- **All Medicaid health care services**
- **Long-term care services** within OPWDD system (DC, ICF, HCBS Waiver, CAH Waiver, MSC, clinic, day treatment) and also under the auspice of other state agencies (nursing homes, personal care, etc.)

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The People First Waiver will result in a service delivery system that provides comprehensive care to each individual.

This comprehensive system will encompass OPWDD's traditional long-term care services (those currently provided through the 1915c waiver) plus Medicaid services related to acute and chronic health care, behavioral health care and addiction services.

Coordinating all of an individual's services through a person-centered service plan will support improved planning and delivery of all of the services an individual needs.

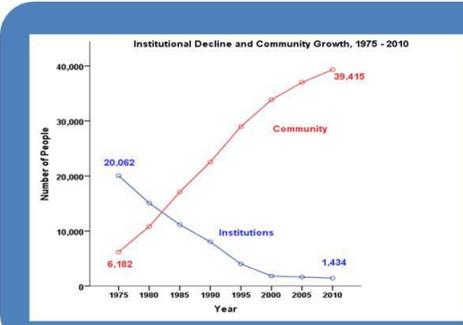


Why is Reform Needed?

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Between 1975 and 2010 Institutional Services Declined While Community Services Dramatically Increased



Over the last 40 years, New York's system of care for individuals with developmental disabilities has evolved from one of the largest institutional systems to a system of high-quality community based services.

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The blue line on this graph shows the decline of the number of individuals living in institutional settings to less than 1,500. The red line represents the growth in the provision of community services. This is a good pattern and shows that we have made significant progress. However, as we have shifted services out of institutions and into the community, OPWDD's administrative and fiscal structures have also stayed tied to our institutional past. There remains much room to better integrate individuals into their communities

OPWDD’s data systems are not person-centered. Its financial systems are focused more on provider agency needs than on individuals’ needs, and the administrative structure no longer make sense. The People First Waiver is an opportunity to redesign these systems to be more responsive to individual and family needs.

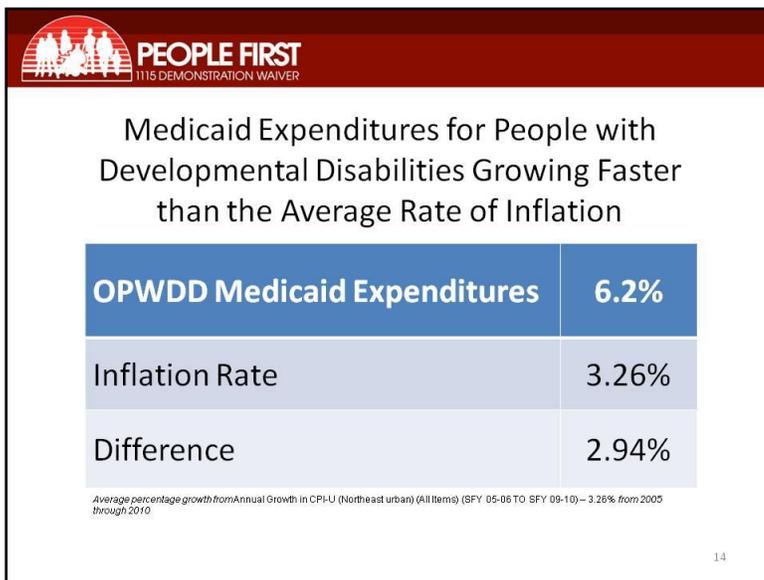


Despite these Incredible Advances, Much of our “Infrastructure” and System Investment Is Tied to the Institutional Past

Data systems Financial systems Administrative structure

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Another reason we have to reevaluate our current system is that the cost of delivering service is rising faster than other costs.

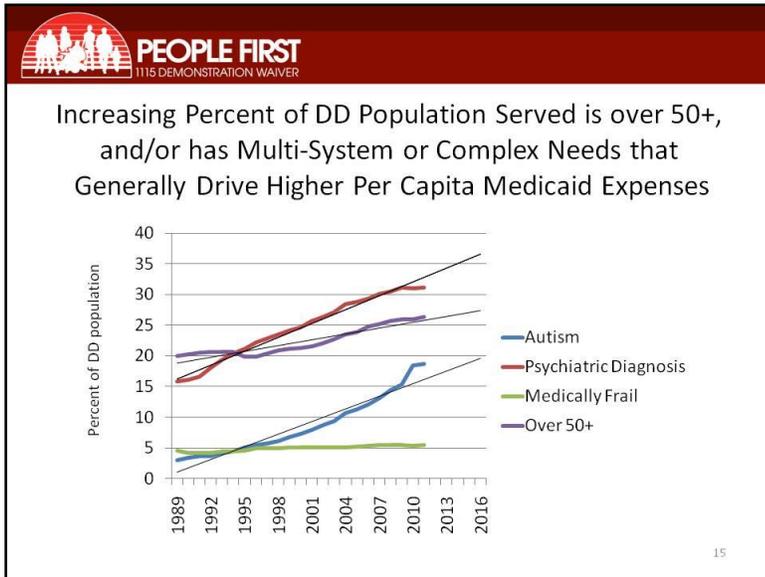


Medicaid Expenditures for People with Developmental Disabilities Growing Faster than the Average Rate of Inflation

| | |
|------------------------------------|-------------|
| OPWDD Medicaid Expenditures | 6.2% |
| Inflation Rate | 3.26% |
| Difference | 2.94% |

Average percentage growth from Annual Growth in CPI-U (Northeast urban) (All Items) (SFY 05-06 TO SFY 09-10) – 3.26% from 2005 through 2010

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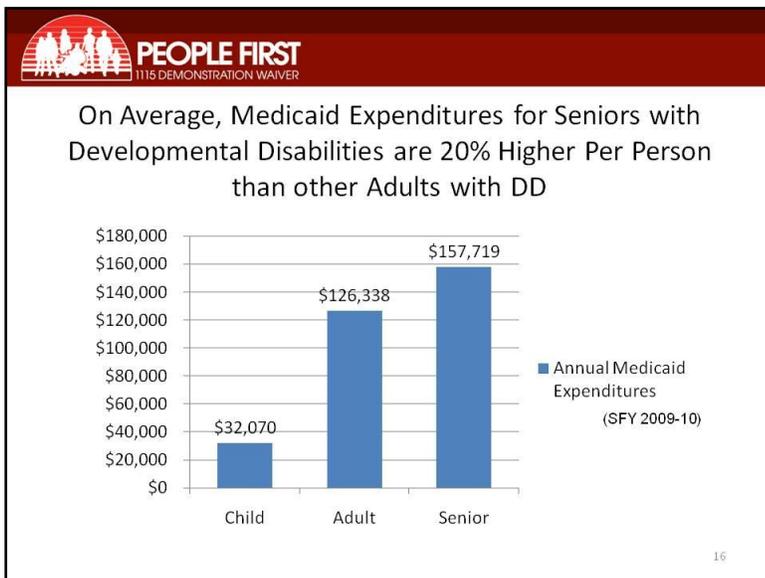


OPWDD is seeing an increasing number of people seeking services from our system – a growth rate of almost three percent annually on average.

OPWDD data are indicating that the percent of individuals being served that are over 50 years old, and those with multi-system or complex service needs, has been steadily growing for the past several decades.

We have also been seeing an increasing rate of diagnoses of autism spectrum disorders (ASDs), something which is

happening across the country. Right now, ASDs are among the fastest growing developmental disabilities in New York State. The proportion of people with ASDs who receive OPWDD services has increased nearly five-fold from only three percent in 1989 to more than 17 percent in 2010.

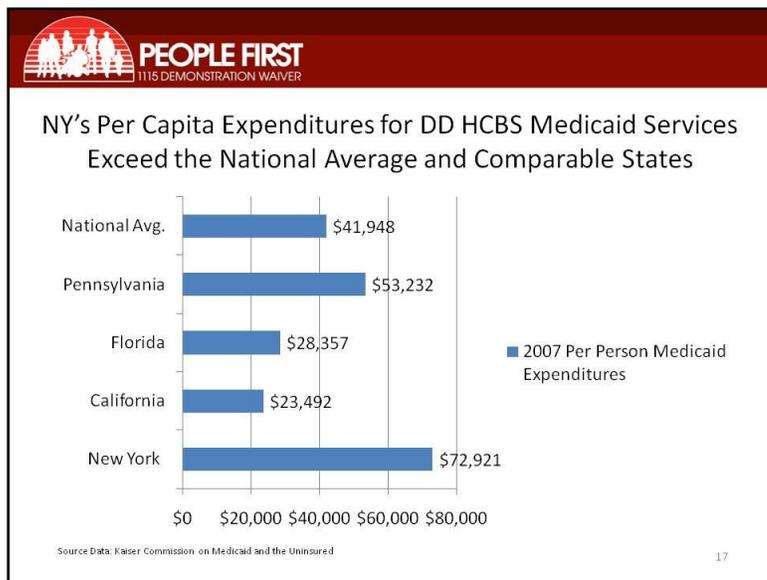


This slide illustrates another challenge that we face as a system. The cost per person for individuals who are 50 years old or older is much higher than those associated with the younger population.

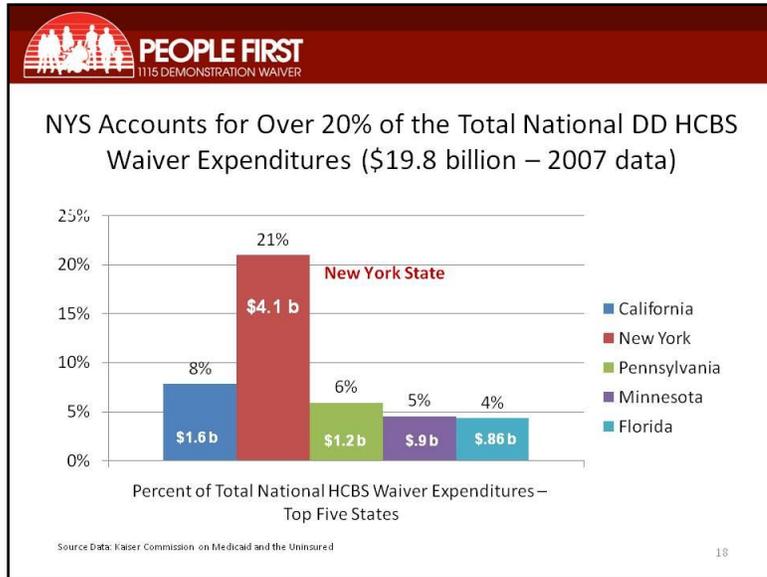
It is a success that our population is living longer than ever, but with the growing number of seniors, we need to make sure our system is financially sustainable.

We need to spend money in smarter ways by successfully coordinating care to improve outcomes for individuals and avoid high-cost services, such as hospitalizations.

This slide shows that the per person Medicaid expenditure for people with developmental disabilities exceeds the national average and that of comparable states.



While New York stands out as a leader in meeting the needs of individuals with developmental disabilities, we can probably use the money we spend more effectively.





Why is Reform Needed?

New York State's Current OPWDD Medicaid Structure is not sustainable

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Increasing Need for Flexible Residential Services

- 23% respondents stated they would “prefer to live someplace else”
(2009-10 NCI consumer satisfaction survey data, people across ALL living situations from independent to facility-based)
- 9% of people living in supervised residences resemble people in supportive settings
(January 2011 analysis of select DDP characteristics for individuals living in supportive living arrangements and individuals living in supervised living arrangements)
- 36.8% people on residential wait list have needs similar to people in supportive settings
(January 2011 analysis of select DDP characteristics for individuals living in supportive living arrangements and second quarter 2010 residential wait list)

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When we have asked people what they want, we have learned that many would like to live somewhere else.

Data indicate that there may also be other changes we can make in the current system that would allow people to live less restricted lives.

As outlined in the concept paper, the People First waiver demonstration will:

- Address infrastructure adequacy by creating “no wrong door”;
- Improve opportunities for choice and community participation; and
- Enhance quality.

Ultimately, it will lead to a system that performs better for individuals with developmental disabilities.



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People First Waiver Demonstration

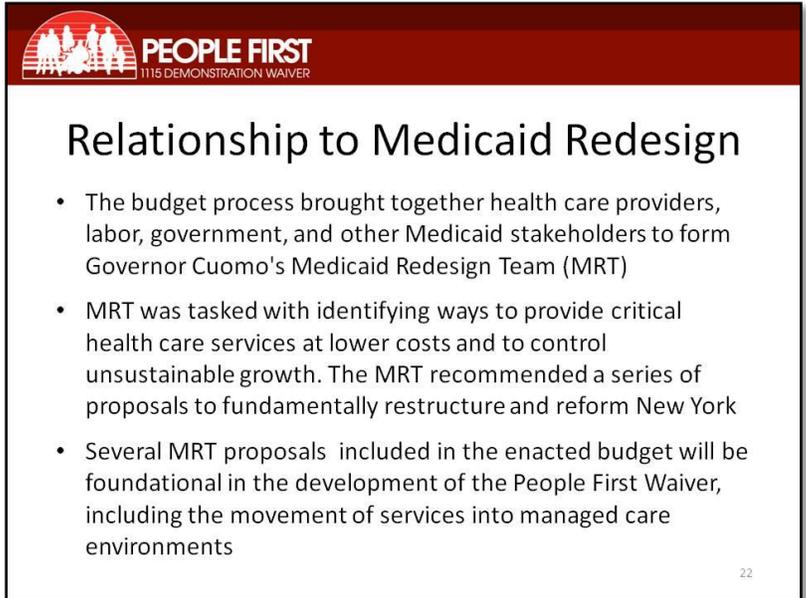
1. Address current infrastructure adequacy
 - Enhance coordination of care and create “no wrong door”
 - Modernize financial platform to be more person-centered, encourage efficiency, improve accountability, and reduce costs
2. Improve opportunities for choice and community participation
 - Enhance focus on person-centered planning, individual responsibility, and self-determination
 - Minimize reliance on institutional care by establishing a broader menu of community-based services, and transitioning people currently in institutional settings into community-based settings
3. Enhance quality
 - Develop a comprehensive quality management system that is driven by performance metrics linked to personal outcomes and system performance

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Some people have asked, “What is the relationship between this waiver and the state’s Medicaid redesign initiative?”

The answer is: The People First Waiver would be happening without the Medicaid Redesign Team (MRT), but the recommendations made by the MRT will influence what we are doing.

Our goal will be to achieve a “good” care management model that effectively supports the needs of individuals and leads to improved personal outcomes for the individuals we serve.

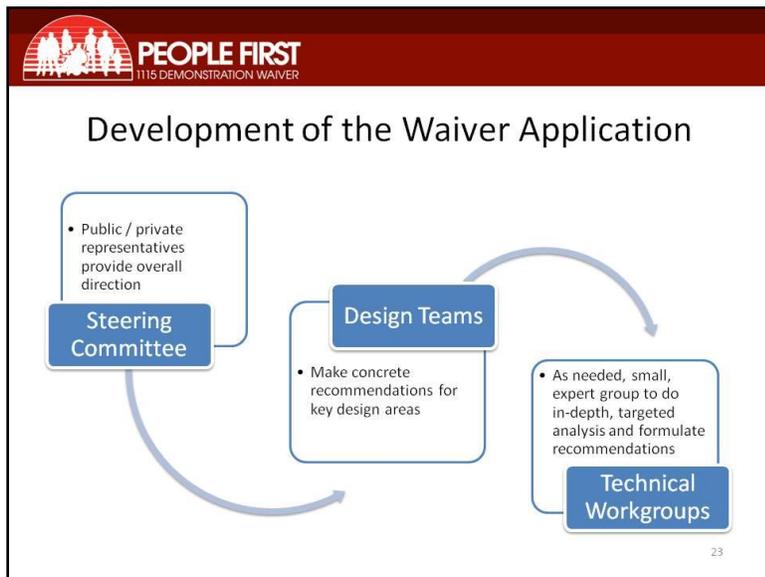


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Relationship to Medicaid Redesign

- The budget process brought together health care providers, labor, government, and other Medicaid stakeholders to form Governor Cuomo’s Medicaid Redesign Team (MRT)
- MRT was tasked with identifying ways to provide critical health care services at lower costs and to control unsustainable growth. The MRT recommended a series of proposals to fundamentally restructure and reform New York
- Several MRT proposals included in the enacted budget will be foundational in the development of the People First Waiver, including the movement of services into managed care environments

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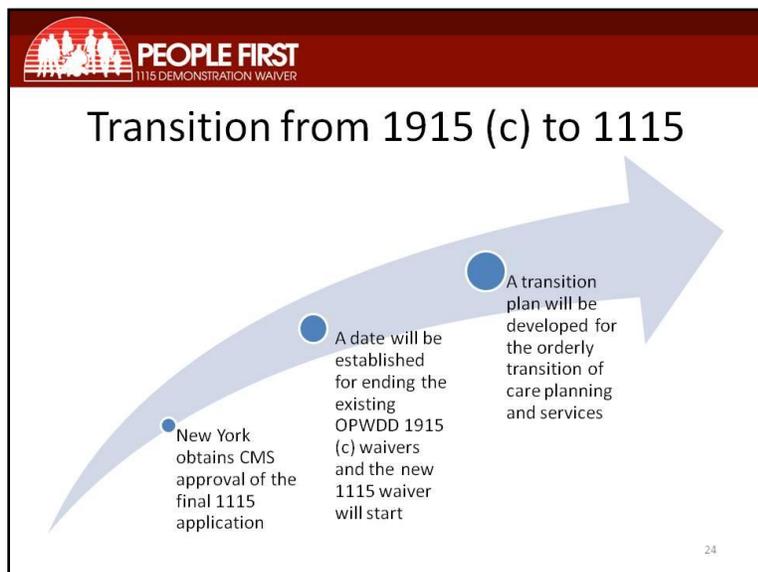
Development of the waiver application will be a collaborative process involving many different parties representing the public and private sectors as well as people with developmental disabilities and their family members.

A Steering Committee will oversee and advise the overall application development.

Design teams will explore key elements of the system reforms, and will create distinct, targeted technical workgroups within their subject areas that will examine critical technical areas in

significant detail.

All groups will include diverse perspectives by way of including individuals with developmental disabilities, family members and advocates, State agency staff and leaders, as well as experts from the private and nonprofit sectors with experience in fields such as behavioral health, long-term care, health care, and service provision.



OPWDD will work with all of its stakeholders to develop an implementation plan for the People First Waiver that will clearly prescribe an orderly transition from the current waiver to the new waiver.

The transition plan will be made public.

Extensive communication will accompany every phase of the transition.

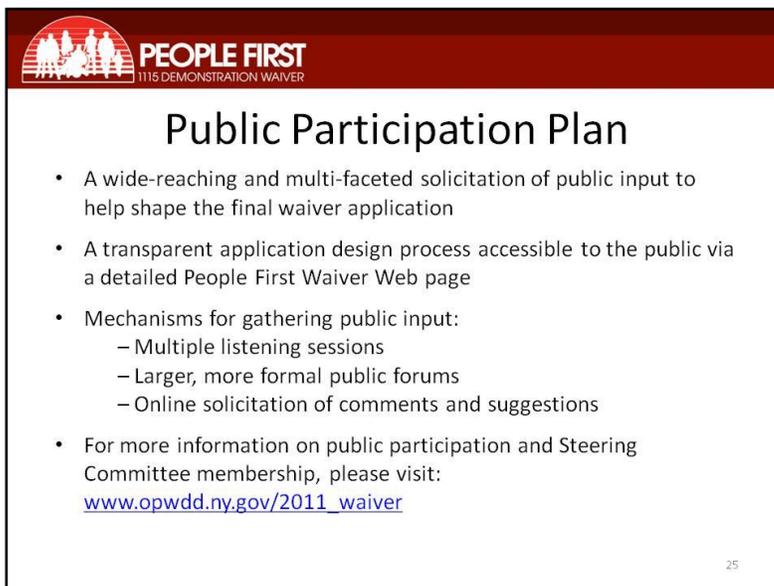
Public participation in the development of the People First Waiver is required by CMS and is critical to ensuring that the system improvements contained in the waiver are shaped by those who receive OPWDD services.

The intent of the public participation plan is to collect input from a wide range of parties and to make the waiver application process as transparent to the public as possible.

The public participation plan will provide a variety of ways (electronic, phone, and in-person) for the public to submit comments and questions about the People First Waiver. It will make the results of these outreach mechanisms available to the public.

We are here today to collect your input regarding the development of the waiver application.

The input received today will be posted on the People First Waiver Web page.

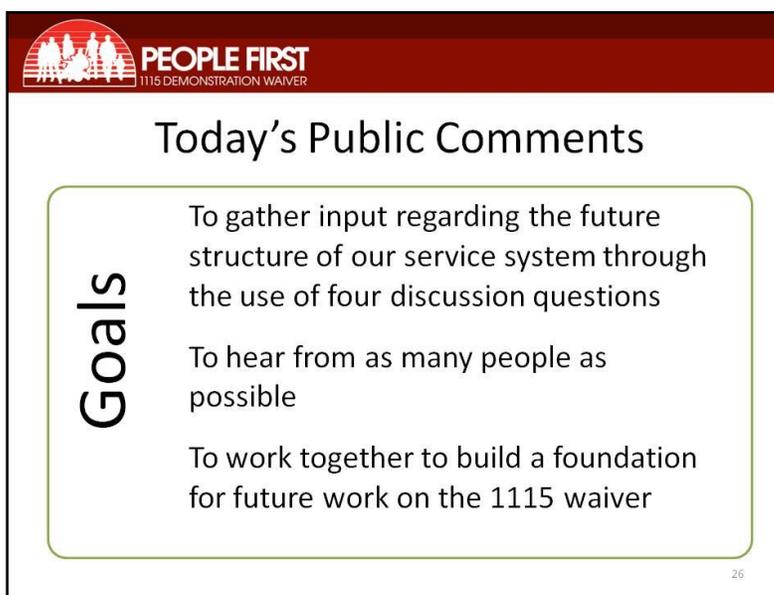


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Public Participation Plan

- A wide-reaching and multi-faceted solicitation of public input to help shape the final waiver application
- A transparent application design process accessible to the public via a detailed People First Waiver Web page
- Mechanisms for gathering public input:
 - Multiple listening sessions
 - Larger, more formal public forums
 - Online solicitation of comments and suggestions
- For more information on public participation and Steering Committee membership, please visit:
www.opwdd.ny.gov/2011_waiver

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Today's Public Comments

Goals

- To gather input regarding the future structure of our service system through the use of four discussion questions
- To hear from as many people as possible
- To work together to build a foundation for future work on the 1115 waiver

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Questions

1. How can we further break down barriers and support people to live truly integrated lives in the community?
2. What do families need to better support their loved ones at home?
3. What reform ideas do you have to help us operate more efficiently so that more funds can be directed to the services and supports people need to be healthy and engaged in meaningful work and activities?
4. What should we be measuring to tell us if we are doing a good job supporting people to have good health, positive relationships, live in homes of their choice, and enjoy meaningful activities and employment?

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Timeline for Next Steps

- May 2011
 - Listening Sessions and Public Forums
 - Establish Steering Committee
- Spring 2011
 - Steering Committee Reviews Design Team Charters
 - Establish Design Teams & Technical Workgroups
- Spring & Summer 2011
 - Formulate Recommendations

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During April and May, we conducted listening sessions at locations across New York State. Commissioner Burke met with individuals with developmental disabilities and family members to discuss what they think is most important to improve within the OPWDD service system. (Note: The results of these listening sessions are now summarized and posted on the People First Waiver Web page.

Also during May, the OPWDD 1115 Waiver unit, working with the Department of Health and Governor Andrew Cuomo's staff, invited experts

representing relevant areas of expertise to participate on the Steering Committee and create a plan for key design teams. Throughout the summer months, the Steering Committee and the Design Teams will meet to explore key reform initiatives. The Design Teams will make recommendations to the Steering Committee that will shape the content of the waiver application and the structure and function of service delivery within the waiver.



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Public Resources

People First Waiver application Web page:
www.opwdd.ny.gov/2011_waiver/index.jsp

People First e-mail address for comments
and questions: People.First@opwdd.ny.gov

People First comment line:
1-866-946-9733 or TTY: 1-866-933-4889

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The People First Waiver Web page will serve as the informational hub throughout the waiver development process. This site will provide information on meeting schedules, team membership, public comment, and application development.

A listserv function will allow interested parties to receive notices of updates to the People First Waiver Web page.